YOUTH PARTICIPANT REGISTRATION WORKSHEET

This worksheet is to help you prepare for the 2027 ELCA Youth Gathering, MYLE & the tAble registration process. All information must be entered into your congregational account by your primary adult leader.

First Name: Frances
Last Name: Ladue
Preferred Name: Frances
Email: drazipurple2011@gmail.com
Mobile Phone: 628-282-0116
Address: 217 Yale st.
City SanFrancisco State: CA Zipcode: 94134

Gender Identity: ☒ Female ☐ Male
☐ Gender non-conforming ☐ Custom_____

Racial and/or Ethnic Identity:
- ☐ African Descent or Black
- ☐ American Indian or Alaska Native
- ☐ Asian or Pacific Islander
- ☐ Latino/a
- ☐ Arab or Middle Eastern
- ☒ European American or White
- ☐ Multiracial/multiethnic

What grade is this person at the time of registration (Fall 2026)?

☐ 8th Grade ☒ 9th Grade
☐ 10th Grade ☐ 11th Grade
☐ 12th Grade

Accomodations

Communication + Language Access
- ☐ This person requires Spanish language translation services.
- ☐ This person requires American Sign Language (ASL) interpretation.
- ☐ This person requires assistive listening devices.
- ☐ This person requires other translation or communication support (please specify).

Mobility & Physical Access
- ☐ This person uses a wheelchair full-time.
- ☐ This person uses a wheelchair or mobility aid part-time (cane, walker, crutches).
- ☐ This person has limited mobility but is able to board a bus without assistance.
- ☐ This person cannot stand or walk for extended periods.
- ☐ This person requires accessible seating.
- ☐ This person requires an ADA hotel room.
- ☐

This person will be attending with a Personal Care Assistant (PCA) or service animal. If checked, what service does the animal provide? _____

Visual Access
- ☐ This person needs braille resources.
- ☐ This person needs resources provided electronically in .txt or .rtf.
- ☐ This person needs resources in large print.
- ☐ This person needs a guide/companion for navigation.

Sensory & Neurodivergent Access
- ☐ This person has sensory sensitivity to light.
- ☐ This person has sensory sensitivity to sound.
- ☐ This person benefits from access to low-stimulus or quiet spaces.
- ☐ This person benefits from advance communication about schedules, crowds, or transitions.

Health & Medical Considerations
- ☐ This person has severe allergies (food, environmental, or other).
- ☐ This person needs access to a refrigerated medication storage.
- ☐ Do you have any dietary requirements we should accommodate?
  - ☐ Vegetarian ☐ Vegan
  - ☐ Gluten-free ☐ Dairy-free
  - ☐ Nut-free ☐ Soy-free
  - ☐ Egg-free

SERVE Experience Accessibility Needs
(only complete if your congregation is participating in SERVE)
- ☐ This person is medically prohibited from prolonged exposure to sun or heat.
- ☐ This person is medically prohibited from handling certain food products.
- ☐ This person is medically prohibited from being around animal allergens.
- ☐ This person is medically prohibited from walking long distances.
- ☐ This person is medically prohibited from dusty or poor air quality environments.
- ☐ This person may need SERVE activities adapted to their abilities.

Other Needs or Considerations
Mild Asthma, no extra services but caution

YOUTH PARTICIPANT REGISTRATION WORKSHEET

Please Print

Youth Name: Frances Ladue

Emergency Contact Name: Ruth Anne Ladue
Emergency Contact Relationship: Mother
Emergency Contact Mobile Phone: 650-576-3199

Gathering Pre-Events & Pre-Experience

Please note: *MYLE and the tAble require a $50 non-refundable housing deposit at the time of registration. There is no registration fee for MYLE or the tAble. SERVE is $100 per person, with a $50 non-refundable deposit due at the time of registration. Additionally, there are only 4,000 spots available for SERVE (first-come-first-serve). If participating in SERVE, your full congregational group is required to participate (with the exception of those attending MYLE and the tAble). Participants can participate in only one pre-event or pre-experience.*

- ☐ Register me for the Multicultural Youth Leadership Event (June 26 - 28, 2027).
- ☐ Register me for the the tAble (June 26 - 28, 2027).
- ☐ Register me for SERVE, an add-on experience (June 28).

T-Shirt Size

Please note: *Only participants that are attending MYLE, the tAble or participating in SERVE will receive a Gathering provided t-shirt. If you'd like to purchase shirts for your group, please visit the official Gathering store at Old Lutheran.*

If attending MYLE, the tAble, or participating in SERVE, my t-shirt size is:

☐ Small ☐ Medium ☐ Large
☐ X Large ☐ XX Large ☐ 3XL ☐ 4XL

Youth Participant Agreement

Please read carefully, sign and bring a copy to the 2027 ELCA Youth Gathering. This form will be required to receive a wristband.

Part 1: Youth Participant Agreement and Covenant

I desire to participate in the Evangelical Lutheran Church in America's ("ELCA") 2027 ELCA Youth Gathering in Minneapolis, MN, June 28-July 2, 2027, Multicultural Youth Leadership Event ("MYLE") June 26-28, 2027, the tAble, June 26-28, 2027 and/or SERVE, June 28, 2027 (collectively "Gathering"). In exchange for being allowed to participate in the Gathering, and the benefits derived from such participation, I knowingly and voluntarily sign and agree to be bound by this Participant Agreement ("Agreement"):

1. ELCA DIRECTIONS, RULES, POLICIES AND PROCEDURES. I shall abide by all ELCA directions, rules, policies and procedures for the Gathering.

2.PUBLICITY RELEASE. I grant the ELCA and its ENGAGE exhibitors a worldwide, sub-licensable, perpetual, irrevocable, royalty free right (but not the obligation) to photograph, record (audio and visual), digitize, reproduce, distribute, prepare derivative works based on, publicly perform, publicly display, and otherwise use my name, image, likeness, voice, biographical information, and other personal characteristics as they may appear in photographs, recordings (audio and visual), writings, messages, artwork, and other materials (collectively, "Materials") related to the Gathering, in all formats and media now known or hereinafter created, for purposes related to the mission and ministries of the ELCA and its ENGAGE exhibitors, including advertising, trade and commercial purposes related to the ELCA's mission and ministries. I ACKNOWLEDGE THE ELCA IS THE OWNER OF THE MATERIALS AND I HAVE NO RIGHT TO INSPECT OR APPROVE THE MATERIALS OR THE ELCA'S USE OF THE MATERIALS.

3. SOCIAL MEDIA USE AND LICENSE. I understand the ELCA maintains various social network profiles, messaging accounts, blogs, listservs, chat rooms, websites, and other online forums (collectively, "ELCA Social Media") which allow users to post, submit, publish, and/or display (collectively, "post") text, images, recordings, (audio and visual) and other content (collectively, "User Contributions"). I understand ELCA Social Media is a public forum and not confidential and that I should not post anything I wish or am required to keep confidential. I understand that I am responsible for the content of my User Contributions. I represent that I will not post any content to ELCA Social Media which: (i) violates applicable law or the legal rights of another person; (ii) is defamatory, obscene, indecent, abusive, harassing, violent, hateful, sexually explicit, pornographic, or discriminatory; (iii) is likely to deceive another person; and (iv) I do not have the legal right to post. I grant the ELCA and its ENGAGE exhibitors a worldwide, sub-licensable, perpetual, irrevocable, royalty free right (but not the obligation) to reproduce, distribute, prepare derivative works based on, publicly perform, publicly display, and otherwise use for purposes related to the mission and ministries of the ELCA and its event exhibitors, in all formats and media now known or hereinafter created, any User Contributions I post to ELCA Social Media. I ACKNOWLEDGE I HAVE NO RIGHT TO INSPECT OR APPROVE THE ELCA'S USE OF MY USER CONTRIBUTIONS.

4. ASSUMPTION OF ALL RISKS. I acknowledge my decision to participate in the Gathering may expose me to various risks and dangers, including personal injury, death, and loss of or damage to my personal property. I KNOWINGLY AND VOLUNTARILY ASSUME ALL RISKS ASSOCIATED WITH MY PARTICIPATION IN THE GATHERING.

5. LIABILITY RELEASE, CLAIMS WAIVER AND COVENANT NOT TO SUE. TO THE FULLEST EXTENT POSSIBLE PURSUANT TO APPLICABLE LAW, I KNOWINGLY, VOLUNTARILY, AND IRREVOCABLY RELEASE FROM ALL LIABILITY INCLUDING NEGLIGENCE, WAIVE ALL CLAIMS AGAINST, AND COVENANT NOT TO MAKE OR BRING ANY CLAIM AGAINST THE ELCA AND/OR ITS SEPARATELY INCORPORATED MINISTRIES, AFFILIATES, DIRECTORS, OFFICERS, EMPLOYEES, AGENTS, VOLUNTEERS, REPRESENTATIVES, AND CONTRACTORS (COLLECTIVELY, "RELEASED PERSONS") IN ANY WAY ARISING OUT OF OR RELATED TO: (I) THE GATHERING; (II) MY PARTICIPATION IN THE GATHERING; AND/OR (III) THE ELCA'S EXERCISE OF THE RIGHTS GRANTED BY ME TO THE ELCA UNDER THIS AGREEMENT.

6. NO FINANCIAL COMPENSATION. I shall not receive any financial compensation as consideration for this Agreement or the rights granted by me to the ELCA hereunder.

7. MISCELLANEOUS. This Agreement is governed by and construed in accordance with the substantive laws of the State of Illinois, excluding its choice of law rules. If any provision of this Agreement is invalidated or held unenforceable, the invalidity or unenforceability of that provision shall not affect the validity or enforceability of this Agreement. As to any provision found to be invalid or unenforceable as written, the same shall not be void, but rather shall be reformed and enforced to the maximum

Please Print

Youth Name: Frances Ladue

extent permissible under applicable law, as if originally executed in that form by me. If the ELCA agrees to waive its right to enforce any term of this Agreement, it does not waive its right to enforce the term, or any or all other terms, of this Agreement at any other time. If there is any conflict between the headings, captions, and/or numbers and the text of this Agreement, the text will control. This Agreement is binding on me and my heirs, executors, administrators, legal representatives, successors and assigns.

8. PARTICIPANT COVENANT AND CODE OF CONDUCT: As a participant in the ELCA Youth Gathering, I recognize that my actions impact the safety, well-being, and experience of others. I understand that this is a church-sponsored event grounded in shared values of respect, responsibility, and community. In order to attend the ELCA Youth Gathering, I agree to adhere to the following code of conduct and expectations.

Prohibited Conduct and Items: In addition to conduct that is unlawful, certain activities are prohibited at the Gathering regardless of whether they are otherwise legal. I agree to adhere to all of the following Gathering Code of Conduct provisions at all times while attending the ELCA Youth Gathering. Any violation may result in disciplinary action, up to and including immediate removal from the Gathering at the participant's expense, at the sole discretion of the Gathering event staff.

Gathering Code of Conduct:

- The manufacture, distribution, possession, or use of controlled substances in violation of law is strictly prohibited. This prohibition does not apply to prescription medications that have been lawfully prescribed to the participant and are used only by the participant and only in accordance with the prescribing healthcare provider's instructions. In addition, possession or use of any alcohol, cannabis, tobacco, vaping products, or other intoxicants is prohibited at the Event, regardless of legality.
- Any disrespectful behavior will be dealt with quickly and certainly. Participants who use inappropriate language, hate speech, or offensive language, or engage in destructive behavior, may be removed from the Gathering. Inappropriate language includes, but is not limited to, profanity, whether or not directed at others, harassment, threats, intimidation, or disruptive conduct, and will be enforced at the discretion of the Gathering staff.
- I will respect and care for all participants as siblings in Christ and will conduct myself in a manner that promotes physical and psychological safety, dignity, and inclusion. Respect and appropriate behavior will always be given to fellow participants and adults. The Gathering believes that groups have the right to express their views on a particular issue or cause. However, demonstrations should not interfere with the operation of the Gathering.
- Care should be taken to respect the individuals outside our event to make the Gathering possible, including bus drivers, police officers, security and medical personnel, and other venue and hotel staff, including front desk, concierge, and guest services.
- The Gathering will remain free of all sex, gender, and racial discrimination. Harassment, assault, and misconduct, as well as interpersonal violence, bullying, and stalking will not be tolerated. Any of the above behavior may result in immediate removal from the Gathering.
- Possession, use, or presence of any weapons or dangerous objects of any kind, including firearms, is strictly prohibited at the Gathering, regardless of whether such items are otherwise legally permitted.
- Sexual activity and conduct that is inappropriate for a supervised youth event, including public displays of sexual behavior or conduct that violates event supervision or lodging rules, is strictly prohibited.
- All Gathering participants shall always adhere to all venue and lodging rules and regulations.

Participation and Attendance: I agree to actively participate in scheduled sessions and events throughout the ELCA Youth Gathering, unless otherwise excused by a designated adult leader due to illness, safety concerns, or another approved reason.

Safety and Supervision: I understand that my safety and the safety of others are always the primary concern. I agree to follow all safety instructions and supervision requirements. These requirements include:

- Remaining in designated areas and my assigned lodging when not attending scheduled events.
- Traveling only in groups of three or more persons when off-site or moving between locations.
- Always carrying personal identification.
- Checking in with designated adult leaders at required times and locations.
- Returning to assigned lodging by the established curfew times.
- Informing a designated adult leader before going off-site and complying with all check-in requirements.

Use of Space: I understand that common areas designated by Event leadership are to be used for socializing and group activities, and that private lodging rooms are not intended for congregating.

Reporting Concerns: Gathering participants shall immediately address and report any safety, health, or crime-related concerns, including bullying, harassment, racial misconduct, drugs, online threats, fighting, weapons, or theft, to a designated adult leader, event staff member, or other appropriate authority.

Consequences: I understand that failure to comply with this covenant or with ELCA Youth Gathering rules and policies may result in disciplinary action, including removal from the ELCA Youth Gathering at my parents' or guardians' expense.

I HAVE READ THIS AGREEMENT AND UNDERSTAND ALL OF ITS TERMS AND CONDITIONS. I UNDERSTAND THAT IF I SIGN BELOW, I AM ENTERING INTO A LEGAL AGREEMENT, WHICH WILL BIND ME TO THE TERMS OF THIS AGREEMENT, AND THAT BY SIGNING THIS I AM GIVING UP SUBSTANTIAL LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE THE ELCA.

Youth Participant Name (Printed):
Frances Ladue

Youth Participant Signature:
Frances Ladue

Date: 11/8/2026 Phone: 628-282-0116
Address: 217 Yale st.
City: San Francisco State: CA Zip: 94134
Email Address: drazipurple2011@gmail.com

Part 2: Youth Participant's Parents/Legal Guardian Waiver and Consent

I am the parent or legal guardian of the Youth Participant named above. The Youth Participant desires to participate in the Gathering. In exchange for the Youth Participant being permitted to participate in the Gathering, and the benefits derived from such participation, I knowingly and voluntarily sign and agree to be bound by this Agreement, including Parts I and II.

1. PERMISSIONS. I give my permission for the Youth Participant to participate in the Gathering. I give my permission for the Youth Participant to enter into this Agreement and to grant the ELCA the rights contemplated in Part I of this Agreement. I have the legal authority to grant these permissions.

2. ASSUMPTION OF ALL RISKS. I acknowledge the Youth Participant's participation in the Gathering may expose the Youth Participant to various risks and dangers, including personal injury, death, and loss of or damage to personal property. I KNOWINGLY AND VOLUNTARILY ASSUME ALL RISKS ASSOCIATED WITH THE YOUTH PARTICIPANT'S PARTICIPATION IN THE GATHERING AND ENTERING INTO THIS AGREEMENT.

3. RELEASE OF LIABILITY. TO THE FULLEST EXTENT POSSIBLE PURSUANT TO APPLICABLE LAW, I KNOWINGLY, VOLUNTARILY, AND IRREVOCABLY RELEASE FROM ALL LIABILITY INCLUDING NEGLIGENCE, WAIVE ALL CLAIMS AGAINST, AND COVENANT NOT TO MAKE OR BRING ANY CLAIM AGAINST THE RELEASED PERSONS IN ANY WAY ARISING OUT OF OR RELATED TO: (I) THE GATHERING; INCLUDING TRANSPORTATION TO AND FROM GATHERING LOCATIONS, (II) THE YOUTH PARTICIPANT'S PARTICIPATION IN THE GATHERING; (III) THE YOUTH PARTICIPANT ENTERING INTO THIS AGREEMENT; AND/OR (IV) THE ELCA'S EXERCISE OF THE RIGHTS GRANTED TO THE ELCA UNDER THIS AGREEMENT.

4. DEFENSE, INDEMNIFICATION AND HOLD HARMLESS. I SHALL DEFEND AND INDEMNIFY THE RELEASED PERSONS AGAINST ALL CLAIMS, DEMANDS, LOSSES, DAMAGES, AND EXPENSES (INCLUDING REASONABLE ATTORNEYS' FEES AND COSTS INCURRED IN DEFENDING THE SAME), IN ANY WAY ARISING OUT OF OR RELATED TO: (I) THE YOUTH PARTICIPANT'S CONDUCT, ACTIONS, OR OMISSIONS; (II) THE YOUTH PARTICIPANT'S PARTICIPATION IN THE GATHERING; (III) THE RIGHTS GRANTED TO THE ELCA UNDER THIS AGREEMENT; (IV) MY OR THE YOUTH PARTICIPANT'S BREACH OF THIS AGREEMENT; AND/OR (V) ANY ACTION BY THE YOUTH PARTICIPANT TO DISAFFIRM OR VOID THIS AGREEMENT.

5. Parent/Legal Guardian Independent Liability. I shall remain liable under this Agreement, even if the Youth Participant is subsequently able under applicable law to disaffirm or void this Agreement, as it applies to the Youth Participant. I KNOWINGLY AND VOLUNTARILY WAIVE ALL CLAIMS TO THE CONTRARY. I understand that the Youth Participant may have the legal ability to disaffirm this Agreement, but I agree that my obligations, including indemnification and release, remain fully enforceable regardless of any such disaffirmance. I agree that any legal action arising out of or related to this Agreement shall be brought exclusively in the state or federal courts located in Illinois.

6. Nothing herein is intended nor shall it be construed as contractually authorizing or permitting the Youth Participant to disaffirm or void this Agreement.

I HAVE READ THIS AGREEMENT AND UNDERSTAND ALL OF ITS TERMS AND CONDITIONS. I UNDERSTAND THAT IF I SIGN BELOW, I AM ENTERING INTO A LEGAL AGREEMENT, WHICH WILL BIND ME TO THE TERMS OF THIS AGREEMENT, AND THAT BY SIGNING THIS I AM GIVING UP SUBSTANTIAL LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE THE ELCA. I AM ALSO AGREEING TO DEFEND AND INDEMNIFY THE ELCA.

Parent/Legal Guardian Name (Printed):
Ruth Anne Ladue

Parent/Legal Guardian Signature:
Ruth Anne Ladue

Youth Participant Name (Printed):
Frances Ladue

Date: 11/8/2026

YOUTH PARTICIPANT REGISTRATION WORKSHEET

Medical and Emergency Form

Please read carefully, sign and bring a copy to the 2027 Gathering, MYLE , the tAble and/or SERVE. Attendees may be asked to show a completed copy of this form prior to their participation in certain Gathering activities. The primary adult leader should collect all medical and emergency forms, participant agreement forms and signed covenants for their congregation for use in case of an emergency. Primary Adult Leaders are strongly encouraged to also save digital copies that can be easily accessed from a smart phone.

Participant First Name: Frances
Participant Last Name: Ladue
Address: 217 Yale st.
City: San Francisco State: CA Zip: 94134
Cell Phone: 628-282-0116
Date of Birth: Oct 20, 2011 (10/20/2011)

Part 1: Authorization for Medical Treatment

I, the undersigned, do hereby authorize an adult leader representative of my congregational group, ELCA personnel, qualified medical provider contracted or volunteering at this event, EMS or hospital medical personnel if in transit to consent to and authorize the administration and performance of all treatments that may be considered advisable or necessary in the judgment of attending physicians or medical emergency personnel if no physician can be present, in the event that the Gathering participant should be admitted to any hospital, or need any medical treatment. I give all Health Care Providers permission to release PHI (Protected Health Information) regarding the above named participant for use in their treatment, payment or health care operations. I understand this PHI may be shared with the Adult Leader, accompanying person and/or ELCA personnel.

This authorization shall be in effect from the following dates, when the participant shall be traveling to, and participating in, the 2027 ELCA Youth Gathering, MYLE, the tAble and/or SERVE from _____ to _____.

Parent/Legal Guardian Siganture:
Ruth Anne Ladue

Printed Name: Ruth Anne Ladue
Date: 10 Nov 2026 Phone: 650-576-3199
Address: 217 Yale St
City: San Francisco State: CA Zip: 94134
Email Address: raladueandroid@gmail.com

Youth Participant Siganture:
Frances Ladue

Printed Name: Frances Ladue Date: 10 Nov 2026

Part 2: Emergency Contact Information

Name: Ruth Anne Ladue
Relationship: Mother
Daytime Phone: _____
Evening Phone: _____
Cell Phone: 650-576-3199
Address: 217 Yale st.
City: San Francisco State: CA Zip: 94134
Email: raladueandroid@gmail.com

Part 3: Medical Insurance

Insurance Carrier: United Health Care
Policy #: 700406
Phone#: 866-801-4409

Please photocopy the front and back of participant/cardholder's insurance card and indicate anything else that leaders should know to help avoid or assist in any medical situation that might arise.

Part 4: Health History

Please complete so that health providers can be aware of your needs.

Date of last tetanus/diphtheria immunization: October 2023

Please explain any condition that would prevent participation in any Gathering activity:

Asthma

Do you have any pre-existing medical conditions?

Asthma, Depression, Anxiety

Please list medications that you are currently taking:

See Attached

Please list any allergies to food, medication, or environment:

Additional Comments:

Morning meds (with breakfast)

Sertraline 12.5mg
Buproprion SR 200mg
Methyl-folate 1mg
Fish oil
Saturday and Sunday only:
Iron 65mg
B-12 250mg
D3 5000 IU

Evening meds (around 7pm)

Trazodone 1/4 of 50mg
Magnesium 240mg
Lysine 1000 mg
Probiotics
Drospirenone-ethinyl 3-0.03mg